



2154

TRANSMITTAL FORM

		Application Number	10/007,836
		Filing Date	November 5, 2001
		First Named Inventor	William C. Moyer
		Group Art Unit	2154
		Examiner Name	Unknown
Total Number of Pages in this Submission		Attorney Docket Number	SC90674A DC1

ENCLOSURES

(check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Preliminary <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)	<input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE

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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Joanna G. Chiu	Registration No.	43,629
Signature			
Date	11/11/02		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on the date listed below:

Typed or printed name	Charli Ariens
Signature	
	Date 11/11/02

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TRANSMITTAL

Patent fees are subject to annual revision

Complete if Known

FEE TRANSMITTAL		Application Number	10/007,836
		Filing Date	November 5, 2001
		First Named Inventor	William C. Moyer
		Examiner Name	Unknown
		Group Art Unit	2154
TOTAL AMOUNT OF PAYMENT		(\$400.00)	Attorney Docket No.
			SC90674A DC1

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METHOD OF PAYMENT

FEE CALCULATION (continued)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number

13-4773

Deposit Account Name

Motorola, Inc.

 Charge Any Additional Fee required under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

 Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Paid
101	710	201	365	Utility filing fee
106	320	206	160	Design filing fee
107	490	207	245	Plant filing fee
108	710	208	355	Reissue filing fee
114	150	214	75	Provisional filing fee

SUBTOTAL (1) (\$0.00)

2. EXTRA CLAIM FEES

Total Claims	Previously Paid**		Extra Claims	Fee from below	Fee Paid
	14	20		0	
Independent Claims	8	3	5	80	400
Multiple Dependent				270	0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	* Reissue independent claims over original patent
110	18	210	9	* Reissue claims in excess of 20 and over original patent

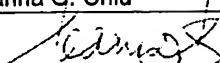
SUBTOTAL (2) (\$400.00)

**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.

*For Reissues, see above

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Joanna G. Chiu	Registration No.	43,629	Telephone	512.996.6839
Signature			Date	/ /	



#4/B
2-13-02
DOCKET NO.: SC90674A DC1 M.L.

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S) William C. Moyer

GROUP ART UNIT: 2154

APPLN. NO.: 10/007,836

EXAMINER: Unknown

FILED: November 5, 2001

TITLE: METHOD AND APPARATUS FOR INTERFACING A PROCESSOR TO
A COPROCESSOR

Certificate of Mailing

Date of deposit: 1.11.02

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the date indicated above, as first-class mail, with sufficient postage attached thereto, in an
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Signature of Person Mailing Paper

Charli Ariens
Printed Name of Person Mailing Paper

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Assistant Commissioner of Patents
Washington, D.C. 20231

Sir:

~~Please enter this Preliminary Amendment in the above-entitled application.~~

~~Please enter the following amendments:~~

02/06/2002 1W000115 134772 10007836

01 FC:102 420.00 CH